

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | |
|---|-----------------------------------|--|-----------------------------|----------|
| 1 Date of Request: <u>3/18/02</u> | | 2 Serial/Patent # <u>56820074</u> | | |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED | 6 AMOUNT |
| | Filing | | | \$ |
| | Amendment | | | \$ |
| | Extension of Time | | | \$ |
| | Notice of Appeal/Appeal | | | \$ |
| | Petition | | | \$ |
| | Issue | | | \$ |
| | Cert of Correction/Terminal Disc. | | | \$ |
| <input checked="" type="checkbox"/> | Maintenance | 17 | 2/5/02 | \$ 1205 |
| | Assignment | | | \$ |
| | Other | | | \$ |
| | | | 7 TOTAL AMOUNT OF REFUND | |
| | | | \$ 1205 | |
| 10 REASON: | | 8 TO BE REFUNDED BY: | | |
| | | Treasury Check | | |
| | | Credit Deposit A/C #: | | |
| | | 9 0 4 -- 1 1 0 5 | | |
| | Overpayment | | | |
| <input checked="" type="checkbox"/> | Duplicate Payment | | | |
| <input checked="" type="checkbox"/> | No Fee Due (Explanation): | | | |
| M Fee paid timely no pet fee needed | | | | |
| 11 REFUND REQUESTED BY: | | | | |
| TYPED/PRINTED NAME: <u>Bruant</u> | | TITLE: _____ | | |
| SIGNATURE: _____ | | PHONE: _____ | | |
| OFFICE: _____ | | | | |
| ***** | | | | |
| THIS SPACE RESERVED FOR FINANCE USE ONLY: | | | | |
| APPROVED: <u>Alison Kelly</u> | | DATE: <u>3-19-02</u> | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: